



2021-2022 Membership

Name: _____ New? _____ Renewing? _____

Mailing Address: _____ City: _____ State: _____ Zip: _____

Phone: _____ Email: _____

Choose Type of Annual Membership:

- Individual \$ 15.00 Family \$ 20.00 Sustaining \$ 30.00
 Business \$ 50.00 Lifetime \$200.00 (one-time charge)

Additional Donation (thank you!) \$ _____ Total \$ _____

Choose Payment Method:

Credit or Debit card

Name on card _____

Card number _____ Exp Date _____ CVV _____

Check

Please make your check payable to FACL.

Mail this completed form with your card information or check to:

Friends of the Amador County Library, PO Box 701, Jackson, CA 95642

Thinking of volunteering? Check areas that interest you; we'll contact you. No obligation to sign up.

_____ Book Sales

_____ Donation processing

_____ Special events

_____ Fundraising

_____ Communications

_____ Membership

_____ Outreach

_____ Graphics

_____ Administration

_____ Other _____

_____ Sorry, I'm not available to volunteer

Your membership helps the Amador County Library serve us all. Thank you for your support!

friendsoftheaclibrary@gmail.com | P.O. Box 701, Jackson, CA 95642

209-217-1911 | www.friendsacl.org

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